

# **2012 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P10000080171

**FILED**  
**Jun 05, 2012**  
**Secretary of State**

**Entity Name:** VIOLETTE ACADEMY OF CAREER INC.

**Current Principal Place of Business:**

2620 N HIAWASSEE RD  
ORLANDO, FL 32818 US

**New Principal Place of Business:**

2797 N HIAWASSEE RD  
ORLANDO, FL 32818 US

**Current Mailing Address:**

2620 N HIAWASSEE RD  
ORLANDO, FL 32818 US

**New Mailing Address:**

2797 N HIAWASSEE RD  
ORLANDO, FL 32818 US

**FEI Number:**

**FEI Number Applied For (X)**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LARIONE, MARIE V  
106 CORAL WOOD CIRCLE  
KISSIMMEE, FL 34743 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: MARIE V LARIONE

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DPST  
Name: LARIONE, MARIE V  
Address: 106 CORAL WOOD CIRCLE  
City-St-Zip: KISSIMMEE, FL 34743 US

Title: VP  
Name: LARIONE, ANGELO J  
Address: 106 CORAL WOOD CIRCLE  
City-St-Zip: KISSIMMEE, FL 34743 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ANGELO LARIONE

VP

06/05/2012

Electronic Signature of Signing Officer or Director

Date